NON-PATENT LITERATURE

```
File 155:MEDLINE(R) 1951-2006/Jun 05
         (c) format only 2006 Dialog
File   5:Biosis Previews(R) 1969-2006/May W4
         (c) 2006 The Thomson Corporation
File  73:EMBASE 1974-2006/Jun 05
         (c) 2006 Elsevier Science B.V.
File  94:JICST-EPlus 1985-2006/Mar W1
         (c)2006 Japan Science and Tech Corp(JST)
File 144:Pascal 1973-2006/May W2
         (c) 2006 INIST/CNRS
File  35:Dissertation Abs Online 1861-2006/May
         (c) 2006 ProQuest Info&Learning
File  65:Inside Conferences 1993-2006/Jun 02
         (c) 2006 BLDSC all rts. reserv.
File 431:MediConf: Medical Con. & Events 1998-2004/Oct B2
         (c) 2004 Dr. R. Steck
File   8:Ei Compendex(R) 1970-2006/May W4
         (c) 2006 Elsevier Eng.  Info. Inc.
File   6:NTIS 1964-2006/May W3
         (c) 2006 NTIS, Intl Cpyrght All Rights Res
File  34:SciSearch(R) Cited Ref Sci 1990-2006/May W4
         (c) 2006 Inst for Sci Info
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
         (c) 1998 Inst for Sci Info
Set     Items   Description
S1     145632   MAGNET OR MAGNETS
S2      18202   GUIDEWIRE? ? OR GUIDE()WIRE? ?
S3    1613074   TUBE OR TUBES OR TUBULAR OR TUBELIKE OR TUBING OR CATHETER?
             ? OR PIPE OR PIPES OR PIPING
S4    2184026   VINCULUM OR VINCULA OR CHORD? ? OR CORD? ? OR STRING OR ST-
            RINGS OR SUTURE OR SUTURES OR BAND? ?
S5    3505975   FISTULA? ? OR HOLE OR HOLES OR THROUGHHOLE? ? OR BYPASS OR
            PASSAGE? ? OR PATH? ? OR CHANNEL? ? OR DUCT? ?
S6     194759   ANASTOMOS?? OR ANASTAMOS??
S7         33   MAGNETIC()COMPRESSION()ANAST?MOS??
S8         12   S7/2003:2006
S9         21   S7 NOT S8
S10        16   RD  (unique items)
S11        16   Sort S10/ALL/PY,A [all by the inventor]
S12         0   S1 AND S2 AND S3 AND S4 AND S5:S6
S13       200   S1 AND S4 AND S5:S6
S14         0   S2 AND S13
S15        19   S3 AND S13
S16        19   S15 NOT S7
S17        18   RD  (unique items)
S18         2   S17/2003:2006
S19        16   S17 NOT S18
S20        16   Sort S19/ALL/PY,A
S21        14   S1 AND S4 AND S6
S22        13   S21 NOT (S7 OR S15)
S23        11   RD  (unique items)
S24        11   Sort S23/ALL/PY,A

20/7/7     (Item 7 from file: 6)
DIALOG(R)File   6:NTIS
(c) 2006 NTIS, Intl Cpyrght All Rights Res. All rts. reserv.
1541782  NTIS Accession Number: NTN90-0975
   Positioning  X-ray Film with  String  and  Magnets : End markers contain
 magnets  and lead for radiographic identification and positioning
  (NTIS Tech Note)
  National Aeronautics and Space Administration, Washington, DC.
  Corp. Source Codes: 011249000
  Nov 90   1p
  Languages: English
  Journal Announcement: GRAI9102
  FOR  ADDITIONAL  INFORMATION:  Contact: NASA Technology Transfer Div., PO
Box  8757  BWI  Airport,  MD  21240;  (301)  621-0100  ext  241.  Refer  to
MFS-29448/TN.
```

NTIS Prices: Not available NTIS
Country of Publication: United States
This citation summarizes a one-page announcement of technology available for utilization. Yet another of several related techniques has been devised to position x-ray film in normally inaccessible places for the inspection of welded joints. In this case, the film is to be placed behind a weld joint in a **tubelike** structure. To the ends of a strip of x-ray film are attached markers made partly of lead and partly of **magnets**. **String** is attached to **holes** in the markers and used to pull the film through the structure to the approximate position of the joint to be inspected. **Magnets** on the outside of the structure are then used to pull the film into the precise position. The lead in the markers is easy to identify in the radiographic images. In case the correct position of the film cannot be determined from the outside, the position can be determined from the locations of the markers in radiographic images and adjusted iteratively during a short sequence of x-ray shots. Thus, fewer shots are required than in a random trial-and-error sequence, and the resulting images are more accurate.

24/7/1 (Item 1 from file: 434)
DIALOG(R)File 434:SciSearch(R) Cited Ref Sci
(c) 1998 Inst for Sci Info. All rts. reserv.
01888435 Genuine Article#: EL204 Number of References: 0
(NO REFS KEYED)
Title: NON- SUTURE MICRO-VASCULAR ANASTOMOSIS USING MAGNET RINGS - PRELIMINARY-REPORT
Author(s): OBORA Y; TAMAKI N; MATSUMOTO S
Corporate Source: KOBE UNIV,SCH MED,DEPT NEUROL SURG/KOBE//JAPAN/
Journal: SURGICAL NEUROLOGY, 1978, V9, N2, P117-120
Language: ENGLISH Document Type: ARTICLE

24/7/2 (Item 2 from file: 73)
DIALOG(R)File 73:EMBASE
(c) 2006 Elsevier Science B.V. All rts. reserv.
01289991 EMBASE No: 1979010485
Sutureless anastomoses in surgery of the gastro-intestinal tract with and without steady magnetic field (an experimental study)
Kanshin N.N.; Permyakov N.K.; Dzhalagoniya R.A.; et al.
N.R. Sklifosovsky Res. Inst. Emergency Med. Treatm., Moscow Russia
Arkhiv Patologii (ARKH. PATOL.) (Russia) 1978, 40/8 (56-61)
CODEN: ARPTA
DOCUMENT TYPE: Journal
LANGUAGE: RUSSIAN SUMMARY LANGUAGE: ENGLISH
Experimentally in 52 dogs, **sutureless** gastro-duodenal and ceco-jejunal side-to-side **anastomoses** were done by means of devices proposed by N.N.Kanshin for connecting void organs, and the features of accretion of the organ walls under the effect of both simple mechanical **compression** and that with the help of a steady **magnetic** field were studied. In both variants the process of **anastomosis** formation completes at 6-7 days after the operation and natural elimination of the **compressing** elements occurs at 7-8 days. Morphological examinations of **sutureless** **anastomoses** formed under a **magnetic** field or without it revealed no differences between them. The experimental results demonstrated a number of significant advantages of the **sutureless** methods of tissue connection over the traditional manual intestinal **suture.**

24/7/3 (Item 3 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
(c) format only 2006 Dialog. All rts. reserv.
05589158 PMID: 7280943
Clinical applications of magnetic rings in colorectal anastomosis.
Jansen A; Brummelkamp W H; Davies G A; Klopper P J; Keeman J N
Surgery, gynecology & obstetrics (UNITED STATES) Oct 1981, 153 (4) p537-45, ISSN 0039-6087--Print Journal Code: 0101370
Publishing Model Print
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Based upon experiments on animals, an anastomotic apparatus, consisting of two **magnetic** rings of polymer bonded, rare earth cobalt **magnets**

embedded in polyester, was developed. There are three types of polyester device with diameters of 25, 28, and 30 millimeters, respectively. The force between the **magnets** varied between 2.5 Newtons at 4 centimer separation and 11.8 Newtons at union. For the low colorectal **anastomosis** , a **magnet** holder, connecting rod and spherical cap were developed. The aim of the technique is a quick restoration of the underbroken submucosal intestinal cylinder by optimal circular apposition of the submucosal layer. The working mechanism is based upon progressive **compression**, leading to necrosis of the intermediate mucosal and submucosal layers by increasing the **magnetic** force while intestinal healing takes place. After seven to 12 days, the **magnets** cut through the disappear from the anastomotic region by intestinal peristalsis. From the initial series of 21 patients, 11 resections of the sigmoid colon and nine low anterior resections were performed. Dehiscence of the **suture** line was noted in two instances. One patient required reoperation. The other patient had a small area of dehiscence at the **suture** line after evacuation of an infected hematoma with a further uncomplicated course. One patient died on the third postoperative day of recurrent myocardial infarction. In the other 18 patients, primary intestinal healing was demonstrated roentgenologically and sigmoidoscopically.
Record Date Created: 19811122
Record Date Completed: 19811122

24/7/5 (Item 5 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
(c) format only 2006 Dialog. All rts. reserv.
07538636 PMID: 3424555
[Use of permanent magnets in suture -free anastomoses]
Primenenie postoiannykh magnitov v besshovnykh anastomozakh.
Myshkin K I; Dolgushin N E; Zavalev V I
Vestnik khirurgii imeni I. I. Grekova (USSR) Jul 1987, 139 (7) p47-51, ISSN 0042-4625--Print Journal Code: 0411377
Publishing Model Print
Document type: Journal Article ; English Abstract
Languages: RUSSIAN
Main Citation Owner: NLM
Record type: MEDLINE; Completed
The authors have performed 25 experiments in dogs for the creation of **compressive** intestinal **anastomoses** with the help of permanent **magnets** . "End-to-end" and "side-to-side" **anastomoses** were formed on the large and small intestines. The **magnets** were eliminated together with necrotized tissues in the natural way on the 4-5th and 9-10th days after operation. Results of the application of " **magnet** " **anastomoses** in clinical practice (6 patients) are described.
Record Date Created: 19880212
Record Date Completed: 19880212

24/7/6 (Item 6 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
(c) format only 2006 Dialog. All rts. reserv.
09033987 PMID: 1750237
[A goal-oriented local approach to the prevention of postoperative suppurative complications]
Tselenapravlennyi mestnyi podkhod k profilaktike posleoperatsionnykh gnoinykh oslozhnenii.
Kanshin N N; Volenko A V; Iakovlev S I
Vestnik Akademii meditsinskikh nauk SSSR (USSR) 1991, (9) p24-7, ISSN 0002-3027--Print Journal Code: 7506153
Publishing Model Print
Document type: Journal Article ; English Abstract
Languages: RUSSIAN
Main Citation Owner: NLM
Record type: MEDLINE; Completed
A goal-oriented local approach to the prevention of postoperative purulent complications includes the use of **compression** **suture** devices to establish intestinal **anastomoses** and a complex of measures aimed at preventing surgical wound suppurations. To form **compression** **anastomoses** , use was made of the original AKA-2, AKA-4, IZhKA and SPTU devices fitted

with **compression** clamps and of **magnet** facilities. The complex of measures to prevent postoperative wound suppurations includes optimal methods of laparotomy wound **suture** and the use of antibacterial **suture** materials, bathing of the wound by pulsed douche under pressure, local antibacterial prophylaxis by new dosage forms, preventive aspiration lavage and drainage of the wounds. Comparative clinical investigations carried out in more than 3,000 patients have demonstrated the effectiveness of the preventive methods under consideration and a decrease of the rate of postoperative wound suppurations from 11.7 to 2.3%. The rate of **anastomosis** failure amounted to 2.7%.
Record Date Created: 19920121
Record Date Completed: 19920121

24/7/8 (Item 8 from file: 34)
DIALOG(R)File 34:SciSearch(R) Cited Ref Sci
(c) 2006 Inst for Sci Info. All rts. reserv.
03267677 Genuine Article#: NR460 Number of References: 5
Title: INFLAMMATORY REPAIR PROCESSES FOLLOWING URETER IMPLANTATION INTO THE BLADDER USING MECHANICAL FORCE OF PERMANENT- MAGNETS - AN EXPERIMENTAL-STUDY
Author(s): LUBASHEVSKII VT; SHABANOV AM; VASILEV GS
Corporate Source: TVER MED INST,DEPT **PATHOANAT**/TVER//RUSSIA/
Journal: BULLETIN OF EXPERIMENTAL BIOLOGY AND MEDICINE, 1993, V116, N11 (NOV), P1443-1445
ISSN: 0007-4888
Language: ENGLISH Document Type: ARTICLE

24/7/9 (Item 9 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
(c) format only 2006 Dialog. All rts. reserv.
09911172 PMID: 8312560
[The inflammatory-reparative processes in the implantation of the ureter into the bladder by using the mechanical forces of permanent magnets]
Vospalitel'no-reparativnye protsessy pri implantatsii mochetochnika v mochevoi puzyr' s pomoshch'iu mekhanicheskikh sil postoiannykh magnitov.
Lubashevskii V T; Shabanov A M; Vasil'ev G S
Biulleten' eksperimental'noi biologii i meditsiny (RUSSIA) Nov 1993, 116 (11) p550-2, ISSN 0365-9615--Print Journal Code: 0370627
Publishing Model Print
Document type: Journal Article ; English Abstract
Languages: RUSSIAN
Main Citation Owner: NLM
Record type: MEDLINE; Completed
An **anastomosis** between the ureter and the bladder using ring **magnets** was first made in our and foreign countries, **Magnetic-compressive** systems, based on alloy of samarium and cobalt (CS-37), were developed, taking into account their practical use in pediatric surgery. Morphological studies showed that the **magnetic compressive** procedure for connecting the ureter with the bladder has some advantages.
Record Date Created: 19940324
Record Date Completed: 19940324

```
File  20:Dialog Global Reporter 1997-2006/Jun 05
         (c) 2006 Dialog
File 781:ProQuest Newsstand 1998-2006/Jun 05
         (c) 2006 ProQuest Info&Learning
Set     Items   Description
S1      73803   MAGNET OR MAGNETS
S2       2001   GUIDEWIRE? ? OR GUIDE()WIRE? ?
S3     597271   TUBE OR TUBES OR TUBULAR OR TUBELIKE OR TUBING OR CATHETER?
               ? OR PIPE OR PIPES OR PIPING
S4    1482683   VINCULUM OR VINCULA OR CHORD? ? OR CORD? ? OR STRING OR ST-
              RINGS OR SUTURE OR SUTURES OR BAND? ?
S5    3241711   FISTULA? ? OR HOLE OR HOLES OR THROUGHHOLE? ? OR BYPASS OR
              PASSAGE? ? OR PATH? ? OR CHANNEL? ? OR DUCT? ?
S6        302   ANASTOMOS?? OR ANASTAMOS??
S7          0   MAGNETIC()COMPRESSION()ANAST?MOS??
S8          2   S1(S)S4(S)S6
S9          2   S1(S)S6 [duplicates]
S10        43   S1(S)S4(S)S5
S11         1   S2:S3(S)S10
S12         1   S11 NOT S9
S13        40   S10 NOT (S9 OR S11)
S14        37   RD  (unique items)
S15        18   S14/2003:2006
S16        19   S14 NOT S15
S17        19   Sort S16/ALL/PD,A [not relevant]

File 149:TGG Health&Wellness DB(SM) 1976-2006/May W2
         (c) 2006 The Gale Group
File 148:Gale Group Trade & Industry DB 1976-2006/Jun 02
         (c)2006 The Gale Group
File  16:Gale Group PROMT(R) 1990-2006/Jun 02
         (c) 2006 The Gale Group
File 160:Gale Group PROMT(R) 1972-1989
         (c) 1999 The Gale Group
File 621:Gale Group New Prod.Annou.(R) 1985-2006/Jun 02
         (c) 2006 The Gale Group
File  98:General Sci Abs 1984-2005/Jan
         (c) 2006 The HW Wilson Co.
File 369:New Scientist 1994-2006/May W3
         (c) 2006 Reed Business Information Ltd.
File 370:Science 1996-1999/Jul W3
         (c) 1999 AAAS
File 441:ESPICOM Pharm&Med DEVICE NEWS 2006/Dec W4
         (c) 2006 ESPICOM Bus.Intell.
File   9:Business & Industry(R) Jul/1994-2006/Jun 01
         (c) 2006  The Gale Group
Set     Items   Description
S1      60181   MAGNET OR MAGNETS
S2       5749   GUIDEWIRE? ? OR GUIDE()WIRE? ?
S3     614261   TUBE OR TUBES OR TUBULAR OR TUBELIKE OR TUBING OR CATHETER?
               ? OR PIPE OR PIPES OR PIPING
S4     619986   VINCULUM OR VINCULA OR CHORD? ? OR CORD? ? OR STRING OR ST-
              RINGS OR SUTURE OR SUTURES OR BAND? ?
S5    2551243   FISTULA? ? OR HOLE OR HOLES OR THROUGHHOLE? ? OR BYPASS OR
              PASSAGE? ? OR PATH? ? OR CHANNEL? ? OR DUCT? ?
S6       2362   ANASTOMOS?? OR ANASTAMOS??
S7          0   MAGNETIC()COMPRESSION()ANAST?MOS??
S8          0   S1(S)S2(S)S3(S)S4(S)S5:S6
S9          2   S1(S)S6
S10         2   S4(S)S9
S11        42   S1(S)S4(S)S5
S12         6   S2:S3(S)S11
S13         6   S12 NOT S9
S14         5   RD  (unique items) [not relevant]
S15        34   S11 NOT (S9 OR S12)
S16        28   RD  (unique items)
S17        10   S16/2003:2006
S18        18   S16 NOT S17
S19        18   Sort S18/ALL/PD,A [not relevant]
```

10/7/1 (Item 1 from file: 148)
DIALOG(R)File 148:Gale Group Trade & Industry DB

15476422 SUPPLIER NUMBER: 97842189 (THIS IS THE FULL TEXT)
Novel Magnetic Technology for Bypass Graft Surgery Selected for Public Television Program; Ventrica Technology Showcased in American Medical Review with Morley Safer.
Business Wire, 0429
Feb 19, 2003
TEXT:

Business Editors/Health & Medical Writers

FREMONT, Calif.--(BUSINESS WIRE)--Feb. 19, 2003

Ventrica Inc., a privately-held medical device company, announced today that the company's **magnetic** technology, the MVP(R) (**Magnetic** Vascular Positioner), which allows for the automated attachment of blood vessels during heart **bypass** surgery, has been chosen as the subject of a "special presentation to honor significant contributions to healthcare" by the American Medical Review, a series produced for Public Broadcasting and hosted by CBS reporter, Morley Safer, aimed at informing and educating consumers and the medical industry about revolutionary medical products, services and issues that most affect them.

The MVP(R) technology utilizes "super- **magnets** " to create a revolutionary and proprietary method for creating **bypass** connections (**anastomoses**) between blood vessels. The device has the potential to advance the field of coronary **bypass** surgery by making the connection of **bypass** graft vessels to the heart quick, easy and more uniform than current techniques, which feature the traditional method of hand-sewing vessels together using fine needles and thread (**sutures**). The Ventrica technology may also allow surgeons to perform **bypass** graft surgery without the need to crack open the chest or without the need for the heart-lung machine.

Ventrica was "hand-picked as a featured guest because of its commitment to promoting progress in the field of health and medicine," according to AMR producers. The series is fed via satellite to 345 Public Television Stations nationwide. It is also sent to more than 200 cities and 127 countries by a news and information service called Worldnet, operated by the United States government. The program is provided to wire services serving 211 U.S. news stations, as well.

Coronary artery disease is a major health care problem worldwide and is the leading cause of death in the United States. Approximately 700, 000 **bypass** procedures are performed each year. Current methods used in coronary **bypass** surgery can be time consuming, technically demanding, and have limited the ability for minimally invasive **bypass** surgery to be routinely performed due to the constraints of manually suturing blood vessels together.

The Ventrica MVP(R) device may reduce many of the challenges that are currently limiting minimally invasive **bypass** surgery such as space constraints, lengthy procedure times, and ease of use. Some of these same advantages may exist in conventional CABG procedures as well. If successful, the Ventrica technology may be able to marry the superior results of CABG surgery with the less-invasive approach of **catheter**-based therapies, such as balloon angioplasty and stents.

"We are pleased to have been selected for the American Medical Review series," Ventrica President and CEO, Mark Foley, said. "This program provides a great forum for patients to become more familiar with breakthrough medical advances, such as ours, which could have a significant impact on the way that they are treated in the future."

Ventrica Inc. was founded in 1998 to develop technologies, which advance the treatment of heart disease. The aim of the company is to reduce the invasiveness of CABG surgery while preserving the superior long-term success of the procedure. The pursuit of this goal has yielded what the company believes to be breakthrough technology for automating the anastomotic connection of blood vessels.

Any statements made regarding the Company's anticipated revenues, earnings, market shares, and regulatory approvals are forward-looking statements, which are subject to risks and uncertainties. The statements made in this document have not been evaluated by the FDA. The MVP(R) Distal **Anastomosis** Device is not available for use in the United States.

FOREIGN AND INTERNATIONAL PATENTS

```
File 350:Derwent WPIX 1963-2006/UD,UM &UP=200635
        (c) 2006 The Thomson Corp.
File 347:JAPIO Dec 1976-2005/Dec(Updated 060404)
        (c) 2006 JPO & JAPIO
Set     Items   Description
S1     239465   MAGNET OR MAGNETS
S2       7060   GUIDEWIRE? ? OR GUIDE()WIRE? ?
S3    1849818   TUBE OR TUBES OR TUBULAR OR TUBELIKE OR TUBING OR CATHETER?
             ? OR PIPE OR PIPES OR PIPING
S4     514541   VINCULUM OR VINCULA OR CHORD? ? OR CORD? ? OR STRING OR ST-
            RINGS OR SUTURE OR SUTURES OR BAND? ?
S5    2897704   FISTULA? ? OR HOLE OR HOLES OR THROUGHHOLE? ? OR BYPASS OR
            PASSAGE? ? OR PATH? ? OR CHANNEL? ? OR DUCT? ?
S6       2856   ANASTOMOS?? OR ANASTAMOS??
S7          1   MAGNETIC()COMPRESSION()ANAST?MOS??
S8          2   S1 AND S2 AND S3 AND S4 AND S5:S6
S9          2   S8 NOT S7 [duplicates]
S10      4107   S1 AND S4
S11         4   S10 AND S6
S12         4   S11 NOT S7:S8
S13        22   S1 AND S6
S14        18   S13 NOT (S7:S8 OR S11)
S15         3   AU='YAMANOUCHI E'
S16        16   S14 NOT S15
S17         3   S10 AND S2 AND S3
S18         1   S17 NOT (S7:S8 OR S11 OR S13)
S19       446   S10 AND S2:S3
S20       113   S5 AND S19
S21      3425   S1/TI AND S5/TI
S22        13   S20 AND S21
S23        11   S22 NOT (S7:S8 OR S11 OR S13 OR S17)
S24        11   S23 NOT S15
S25       535   S1/TI AND S4/TI
S26        43   S19 AND S25
S27        42   S26 NOT (S15 OR S7 OR S8 OR S11 OR S13 OR S17)
S28     68943   IC=A61B-017?
S29         1   S27 AND S28
S30        22   S1/TI AND S4:S5/TI AND S28
S31        16   S30 NOT (S15 OR S7 OR S8 OR S11 OR S13 OR S17 OR S22 OR S29)

  7/7/1     (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
010220286    **Image available**
WPI Acc No: 1995-121541/199516
Operative treatment procedure for double intestinal fistula - connecting loops of intestine by
magnetic compression before operating to suture fistula
Patent Assignee: SVERD MED INST (SVMD  )
Inventor: ODINAK V M; TSAP N A
Number of Countries: 001  Number of Patents: 001
Patent Family:
Patent No     Kind   Date     Applicat No    Kind   Date     Week
RU 2018266     C1  19940830  SU 4667035      A   19890327  199516  B
Priority Applications (No Type Date): SU 4667035 A 19890327
Patent Details:
Patent No  Kind Lan Pg   Main IPC    Filing Notes
RU 2018266    C1     4 A61B-017/00
Abstract (Basic): RU 2018266 C
       The procedure consists of forming a magnetic compression
    anastomosis by introducing magnetic plates in silicone sheaths into
    the feed and return loops of the intestine with the fistulae. Some 3-4
    weeks later surgical intervention allows the loops (1,2) with fistulae
    to be re-sectioned and the defect to be sutured with a double seam of
    catgut and silk.
       ADVANTAGE - Improved functional and anatomical sufficiency.
    Bul.16/30.8.94
       Dwg.4/5
Derwent Class: P31
```

International Patent Class (Main): A61B-017/00

12/7/2 (Item 2 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
015596582 **Image available**
WPI Acc No: 2003-658737/200362
Surgical instrument passing method for heart valve replacement, involves manipulating at least one of permanent magnet , to drive instrument
Patent Assignee: BONUTTI P M (BONU-I); BONUTTI 2003 TRUST-A (BONU-N)
Inventor: BONUTTI P M
Number of Countries: 001 Number of Patents: 002
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
US 20030105474	A1	20030605	US 20015652	A	20011203	200362	B
US 6719765	B2	20040413	US 20015652	A	20011203	200425	

Priority Applications (No Type Date): US 20015652 A 20011203
Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 20030105474	A1		14	A61B-017/04	
US 6719765	B2			A61B-017/04	

Abstract (Basic): US 20030105474 A1
NOVELTY - The surgical instrument is placed on one side of a tissue, a **magnetic** field is established on other side of the tissue. At least one of the permanent **magnet** is manipulated, to drive the surgical instrument.
DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:
(1) **suture** passer;
(2) surgical instrument.
USE - For passing surgical instrument or **suture** passer (claimed) or tissue anchor through the tissue for heart valve replacement and repair, vessel repair and replacement, hernia repair and **anastomosis** .
ADVANTAGE - Insertion and removal of the surgical implement is easily performed by reversing the polarity of the permanent **magnet** .
DESCRIPTION OF DRAWING(S) - The figure shows a side sectional view of the medical instrument.
pp; 14 DwgNo 15/20
Derwent Class: P31; S05
International Patent Class (Main): A61B-017/04
International Patent Class (Additional): A61B-017/28

12/7/3 (Item 3 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
008927896 **Image available**
WPI Acc No: 1992-055165/199207
Hollow organ anastomosis - by inserting smaller dia magnet , with drain tube, in bile duct section, and juxtaposing magnets
Patent Assignee: SVERD MED INST (SVMD)
Inventor: BARYBIN A S; KOZLOV V A; LAGUNOV M V
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 1635966	A	19910323				199207	B

Priority Applications (No Type Date): SU 4393984 A 19880317
Abstract (Basic): SU 1635966 A
According to the proposed method, **magnet** (1) of larger dia. is swallowed by the patient before the operation. **Magnet** (2) of smaller dia. is equipped with central guiding drain **tube** (3) is inserted into the section of bile **ducts**, and is secured around **tube** (3) with **sutures**.
Magnet (1) is placed on the site of the intended **anastomosis**. Auxiliary thread, connected with **tube** (3), is passed with a needle through the intestinal wall, into the **magnet** (1) opening, and pricked out on the side of the **anastomosis** . While pulling the thread, drain **tube** (3) is passed into the **magnet** (1) opening, and **magnets** (1,2) are juxtaposed.
Derwent Class: P31

International Patent Class (Additional): A61B-017/00

12/7/4 (Item 4 from file: 350)
DIALOG(R)File 350:Derwent WPIX

008895470
WPI Acc No: 1992-022739/199203
Left half large intestine two-stage resection - by attaching magnetic rings with electrodes to outer and inner proximal-pt. walls
Patent Assignee: SENYUTOVICH R V (SENY-I)
Inventor: GIL N E; SENYUTOVIC R V
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 1629040	A	19910223	SU 4453630	A	19880525	199203	B

Priority Applications (No Type Date): SU 4453630 A 19880525
Abstract (Basic): SU 1629040 A

According to the proposed method, two **magnetic** rings, with electrodes, are attached to the outer and inner walls of the proximal pt. of the intestine. The end of the cut-off pt. is **sutured** around the outer ring.

Anastomosis is made in the second stage, when the wounds have healed, by coagulating the wall of the proximal pt. between the **magnet** electrodes. The **magnets** are removed through the anus. At the same time, the stump is invaginated into the proximal pt. The stump is taken in with a thread, attached to the electrode, passing through the stoma. The opening at the site of the stoma is covered with a skin flap, and the wound is kept under constant irrigation.

ADVANTAGE - Gives prophylaxis of **suture** failure on the left pt. of the large intestine, while including the cut-off pts. in the **passage**. Bul. 7/23.2.91 (2pp Dwg.No.0/0)

Derwent Class: P31
International Patent Class (Additional): A61B-017/00

16/7/7 (Item 7 from file: 350)
DIALOG(R)File 350:Derwent WPIX

009650218
WPI Acc No: 1993-343768/199343
Retro-duodenal choledocho-duodeno- anastomosis application - uses leading into abdominal cavity and fixing magnetic elements by thread passed through their holes
Patent Assignee: MOSC FIRST AID RES INST (MOFS)
Inventor: KANSHIN N N; LIPATOV V A; YAKOVLEV S I
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 1769863	A1	19921023	SU 4843526	A	19900626	199343	B

Priority Applications (No Type Date): SU 4843526 A 19900626
Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
SU 1769863	A1		3	A61B-017/11	

Abstract (Basic): SU 1769863 A

Squeezing **magnetic** elements are led in retro-duodenal section of **choledoch** and in the lumen of duodenum by using guiding threads. **Magnetic** elements are fitted with through openings made at the same distance from the ends of the elements. The guiding threads are passed via the openings on which the **magnetic** elements are lowered into position and then fixed between themselves.

USE/ADVANTAGE - In surgery, for applying **choledocho-duodeno-anastomosis** by using **magnetic** squeezing elements. Prevention of complications due to more accurate adjustment of **magnets** . Bul.39/23.10.92

Dwg.0/0

Derwent Class: P31
International Patent Class (Main): A61B-017/11

16/7/8 (Item 8 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
009633217
WPI Acc No: 1993-326766/199341
Choledocho-duodeno- anastomosis method - magnets are introduced in turn into duodenum through mouth then into common bile duct through cholecystoma.
Patent Assignee: SVERD MED INST (SVMD)
Inventor: KOZLOV V A; LAGUNOV M V
Number of Countries: 001 Number of Patents: 001
Patent Family:
Patent No Kind Date Applicat No Kind Date Week
SU 1766383 A1 19921007 SU 4797566 A 19891222 199341 B
Priority Applications (No Type Date): SU 4797566 A 19891222
Patent Details:
Patent No Kind Lan Pg Main IPC Filing Notes
SU 1766383 A1 3 A61B-017/11
Abstract (Basic): SU 1766383 A
Ring-shaped **magnets** are introduced into the bile **duct** and duodenum and aligned.
The **magnets** are introduced in turn into the duodenum through the mouth, then into the common bile **duct** through a **cholecystoma**, and 3-4 days later the **anastomosis** is formed by burning through the tissues within the limits of the aligned rings.
USE/ADVANTAGE - To make a **choledocho-duodeno- anastomosis** reducing trauma. Bul.36/30.9.92
Dwg.0/0
Derwent Class: P31
International Patent Class (Main): A61B-017/11

16/7/9 (Item 9 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
009405127 **Image available**
WPI Acc No: 1993-098637/199312
Magnetic compression cholecysto-gastric anastomosis - involves introducing magnet attached to catheter through incision in fundus of gall bladder
Patent Assignee: MOSC MED INST NO2 PIROGOV (MOME-R)
Inventor: AVALIANI M V; BALAYKIN A S; SAVELEV V S
Number of Countries: 001 Number of Patents: 001
Patent Family:
Patent No Kind Date Applicat No Kind Date Week
SU 1708313 A1 19920130 SU 4721438 A 19890720 199312 B
Priority Applications (No Type Date): SU 4721438 A 19890720
Patent Details:
Patent No Kind Lan Pg Main IPC Filing Notes
SU 1708313 A1 3 A61B-017/11
Abstract (Basic): SU 1708313 A
The operation is performed endoscopically, making an incision in the fundus of the gall bladder and introducing a **magnet** fixed to a **catheter** taken into the cavity of the stomach and through the oropharynx to the exterior. A second **magnet** is brought down along the **catheter** into the stomach. The **magnets** are withdrawn with the drain after forming the **anastomosis** .
USE/ADVANTAGE - To form a **magnetic compression** cholecysto-gastro-**anastomosis** , reducing trauma. Bul. 4/30.1.92
Dwg.1/2
Derwent Class: P31; S05
International Patent Class (Main): A61B-017/11

16/7/10 (Item 10 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
009390440
WPI Acc No: 1993-083919/199310
Surgery technique for ureter structures - consists of resection and

anastomosis via cylindrical magnets matching the ureter interior
Patent Assignee: MOSC MED INST NO2 PIROGOV (MOME-R)
Inventor: KOTLOVSKII A M; STEPANOV E A; VASILEV G S
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 1361753	A1	19920423	SU 3986110	A	19851128	199310	B

Priority Applications (No Type Date): SU 3986110 A 19851128
Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
SU 1361753	A1		3	A61B-017/00	

Abstract (Basic): SU 1361753 A

The process comprises resection and **anastomosis** . To increase performance, **compression**-type **anastomosis** is achieved by introduction of a permanent **magnet** into the distal end of the ureter, on a line passing beyond the ureter and the bladder, and then a second **magnet** is lowered via the line into the proximal end of the ureter to abut the first and then the **magnets** are withdrawn after restructuring.

The 5-10 mm. diameter cylindrical **magnets** correspond to the internal diameter of the **anastomosis** ends of the ureter. The cavity formed by the hollows on coupling of the **magnets** is adequate for 5-6 sets of 4/0-6/0 lines providing the stitches. The required contact zone is maintained between the rounded and the hollowed zone of the base, thus not interfering with the **anastomosis** forming process.

ADVANTAGE - The simplified process reduces operation trauma. Bul. 15/23.4.92

Dwg.0/0

Derwent Class: P31
International Patent Class (Main): A61B-017/00

16/7/11 (Item 11 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
008935379
WPI Acc No: 1992-062648/199208
Ureterocystonestomy method - by forming side to side compression anastomosis between ureter wall and bladder submucous-mucous layer using magnets
Patent Assignee: MOSC MED PIROGOV (MOME-R)
Inventor: ISAKOV Y U F; STEPANOV E A; VASILEV G S
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 1277452	A	19910615				199208	B

Priority Applications (No Type Date): SU 3903412 A 19850328
Abstract (Basic): SU 1277452 A

Re-implantation of the distal part of the ureter in the urinary bladder is performed with tunnel anti-reflex protection. The **anastomosis** is formed on a **catheter** which is subsequently withdrawn through the cystostomy.

A side to side **compression** **anastomosis** is formed using **magnets** between the wall of the ureter and the submucous-mucous layer of the urinary bladder. The **magnetic** rings are mounted with a fastening cuff on a ureteral **catheter**, which is taken through the walls of the organs being joined using a needle. **Magnets** with a force of interaction of 4.5-7.5 G/mm2 are used at a distance of 1 mm.

USE - To form a ureterocystostomy with minimal trauma to the tissues, thus reducing post-operation complications. Bul. 22/15.6.91.

Dwg.0/0

Derwent Class: P31
International Patent Class (Additional): A61B-017/00

16/7/14 (Item 14 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
003008878
WPI Acc No: 1981-A8885D/198105
Gullet constriction treatment - by passing circular magnets through gullet, and applying necrosis treatment

Patent Assignee: GERASKIN V I (GERA-I)
Inventor: RUDAKOV S S; VASILEV G S
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
SU 736966	B	19800530				198105	B

Priority Applications (No Type Date): SU 2673065 A 19781016
Abstract (Basic): SU 736966 B

The gullet short striction treatment method includes removal of part of the organ with its subsequent **passage** restoration. To prevent operation complications and to reduce the treatment period, circular **magnets** are moved into the gullet. They are then displaced to the gullet narrowed section. The narrowed section is pressed and after its selective necrosis the **magnets** are removed. The **magnets** are displaced by means of threads. On the second day of treatment the patient is allowed to take liq. through the mouth. The stitchless **anastomosis** quality is higher than the traditional stitch **anastomosis** . Bul.20/30.5.80.

Derwent Class: P31; S05
International Patent Class (Additional): A61B-017/00

18/7/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
008259972 **Image available**
WPI Acc No: 1990-146973/199019
Method of retrograde tracheal int - has balloon introducer and endotracheal tube threaded through oral pharynx through glottal opening
Patent Assignee: BALLEW D H (BALL-I)
Inventor: BALLEW D H
Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
US 4913139	A	19900403	US 89308850	A	19890209	199019	B

Priority Applications (No Type Date): US 89308850 A 19890209
Abstract (Basic): US 4913139 A

The method of translaryngial retrograde tracheal intubation employs a **guide wire** (30) having flexible configurations on both ends. A superior end (34) having a **magnet** (33) for cooperation with a **magnetic** retrievel device. A balloon introducer (10) for insertion into a standard endotracheal **tube** (20) such that after threading the superior end of the orally retrieved **guide wire** through the tip of the introducer and out the distal end of the endotracheal **tube** . The endotracheal **tube** and introducer may be threaded through the oral pharynx (60) through the glottic opening (64), and the vocal **chords** (67) with minimal trauma to surrounding tissue.

The interior end (32) of the **guide wire** is not retained at the insertion site, but is instead advanced inferiorally entirely into the tracheal for anchoring in the tracheal tree, followed by guided insertion of an endotracheal **tube** with a cooperating introducer to minimize wandering of the **tube** upon the **guide wire** .

USE - For establishing an emergency airway which does not require physician skilled in endotracheal intubation.

Dwg.6b,6d/
6f

Derwent Class: P34
International Patent Class (Additional): A61M-015/00

29/7/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
014283128 **Image available**
WPI Acc No: 2002-103829/200214
Suture device in surgery, has puncture units opened and closed by rod which is inside inner pipe , and magnet in secondary thread holder absorbs primary thread holder and lesion hole is sutured with a thread
Patent Assignee: IMPRESSED KK (IMPR-N); KATO H (KATO-I)

Number of Countries: 001 Number of Patents: 001
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
JP 2001353163	A	20011225	JP 2000179016	A	20000614	200214	B

Priority Applications (No Type Date): JP 2000179016 A 20000614
Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
JP 2001353163	A		8	A61B-017/24	

Abstract (Basic): JP 2001353163 A

NOVELTY - Puncture units (1,5) are opened and closed by rod. Rod is inserted into inner **pipe**. Primary thread holder (2) is formed inside the puncture unit (1). **Magnet** in secondary thread holder (8) absorbs the primary thread holder (2). Both the puncture units approach together and lesion **hole** is **sutured** with a thread.

USE - In surgery.

ADVANTAGE - Enables to stitch the **hole** simply and rapidly with thread. Also prevents apply of physical load to patient.

DESCRIPTION OF DRAWING(S) - The figure shows the detailed views of the puncture units attached to stitching device.

Puncture units (1,5)
Primary thread holder (2)
Secondary thread holder (8)
pp; 8 DwgNo 3/10

Derwent Class: P31
International Patent Class (Main): **A61B-017/24**
International Patent Class (Additional): **A61B-017/00** ; **A61B-017/06** ; **A61B-017/12**

31/7/9 (Item 9 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
011492680 **Image available**
WPI Acc No: 1997-470593/199743
Percutaneous arterio-venous fistula catheter system - uses one venous and one arterial catheter, each carrying permanent magnets which aid alignment at target site and electrosurgical electrode for creating fistula
Patent Assignee: BETH ISRAEL DEACONESS MEDICAL CENT (BETH-N); COHN W E (COHN-I); KIM D (KIMD-I); TRANSVASCULAR INC (TRAN-N); BETH ISRAEL HOSPITAL ASSOC INC (BETH-N)
Inventor: COHN W E; KIM D
Number of Countries: 021 Number of Patents: 009
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week	
WO 9733522	A1	19970918	WO 97US2800	A	19970221	199743	B
AU 9719697	A	19971001	AU 9719697	A	19970221	199805	
US 5830224	A	19981103	US 96616588	A	19960315	199851	
EP 889705	A1	19990113	EP 97907789	A	19970221	199907	
			WO 97US2800	A	19970221		
JP 11512640	W	19991102	JP 97532616	A	19970221	200003	
			WO 97US2800	A	19970221		
US 6099542	A	20000808	US 96616588	A	19960315	200040	
			US 98134995	A	19980817		
US 6669709	B1	20031230	US 96616588	A	19960315	200402	
			US 98134995	A	19980817		
			US 2000545168	A	20000406		
			US 2001960003	A	20010921		
JP 3493464	B2	20040203	JP 97532616	A	19970221	200410	
			WO 97US2800	A	19970221		
US 20040236360	A1	20041125	US 96616588	A	19960315	200478	
			US 98134995	A	19980817		
			US 2000545168	A	20000406		
			US 2001960003	A	20010921		
			US 2003714060	A	20031114		

Priority Applications (No Type Date): US 96616588 A 19960315; US 98134995 A 19980817; US 2000545168 A 20000406; US 2001960003 A 20010921; US 2003714060 A 20031114
Cited Patents: US 4874360; US 5087256; US 5353807
Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes

WO 9733522 A1 E 72 A61B-017/32
Designated States (National): AU CA JP
Designated States (Regional): AT BE CH DE DK ES FI FR GB GR IE IT LU MC NL PT SE
AU 9719697 A A61B-017/32 Based on patent WO 9733522
US 5830224 A A61B-017/32
EP 889705 A1 E A61B-017/32 Based on patent WO 9733522
Designated States (Regional): DE FR GB NL
JP 11512640 W 83 A61M-025/00 Based on patent WO 9733522
US 6099542 A A61B-017/32 Div ex application US 96616588
Div ex patent US 5830224
US 6669709 B1 A61B-017/32 Div ex application US 96616588
Div ex application US 98134995
Cont of application US 2000545168
Div ex patent US 5830224
Div ex patent US 6099542
JP 3493464 B2 28 A61M-025/00 Previous Publ. patent JP 11512640
Based on patent WO 9733522
US 20040236360 A1 A61B-017/32 Div ex application US 96616588
Div ex application US 98134995
Cont of application US 2000545168
Cont of application US 2001960003
Div ex patent US 5830224
Div ex patent US 6099542
Cont of patent US 6669709

Abstract (Basic): WO 9733522 A

The system comprises a **tube** having fixed axial length with discrete proximal and distal ends, having at least one internal lumen of predetermined volume with a cutting tool (80) The distal end has a tapered tip end (96), with a vascular wall perforation member (98) and a **magnet** device (100A,B), having an active electrosurgical electrode (114). The electrode rides on a shaped track (110) whose central section brings the electrode tip into contact with the vein wall through an opening (112) in the **catheter** wall.

The return electrode (230) lies between the arterial **catheter**'s **magnets** (228A,B). The **catheters** are introduced into the selected vessels in opposition until their **magnets** pull the electrodes into alignment. A **fistula** between the vessels is created by applying electrosurgical energy as the active electrode is moved over its track.

ADVANTAGE - The system allows arteriovenous **fistulae** to be created without surgery at sites not suitable for surgical intervention, with reduced infection risk. It facilitates identification of suitably adjacent blood vessels, removing the need for dissection and so preserving the vaso vasorum. (Amended Abstract Week 9743, Reissued week 9745)

Dwg.25/26

Derwent Class: P31; P34
International Patent Class (Main): **A61B-017/32** ; A61M-025/00

31/7/14 (Item 14 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
004300649
WPI Acc No: 1985-127527/198521
Perineal artificial anal passage formation - by positioning magnetic ring with coaxial magnets in cavity of pelvis minor
Patent Assignee: FEDOROV V D (FEDO-I)
Inventor: ODARYUK T S; RYKOV V I
Number of Countries: 001 Number of Patents: 001
Patent Family:
Patent No Kind Date Applicat No Kind Date Week
SU 1123650 A 19841115 SU 3447151 A 19820526 198521 B
Priority Applications (No Type Date): SU 3447151 A 19820526
Patent Details:
Patent No Kind Lan Pg Main IPC Filing Notes
SU 1123650 A 2
Abstract (Basic): SU 1123650 A

After rectal extirpation, a **magnetic** ring (1) with three coaxial **magnets** (4,5) is set in the pelvic cavity, with mi-dle **magnet** middle

magnet magnetised radially and end magnets axially. Ring (1) has a perforated flange and perforated funnel (8) and is fixed in the surrounding tissues above the ischial tubers. The musculus levator ani stump is sutured to the flange and the surrounding fatty tissue, ischial bone and sacrum periosteum are sutured to funnel (8), then the large intestine brought down and taken through ring (1) and a colostomy formed and closed by magnetic plug.
USE - To increase the reliability of the colostomy in artificial and passage formation. Bul.42/15.11.80 (2pp Dwg.No.1/1)
Derwent Class: P31; S05
International Patent Class (Additional): A61B-017/00

12/26,TI/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
017625994
WPI Acc No: 2006-137250/200614
Surgical end-to-end anastomotic stapler for suture, uses two magnetic elements including magnet and magnetically permeable element positioned on stapler head and anvil for magnetically coupling anvil to stapler head through tissue layers

16/26,TI/2 (Item 2 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
015570141
WPI Acc No: 2003-632298/200360
Anastomosis apparatus for organ, e.g. intestines, of human body, has balloon that supports the moving magnet when expanded to prevent the moving magnet from being drawn towards the stationary magnet

16/26,TI/4 (Item 4 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
011111136
WPI Acc No: 1997-089061/199709
Device for forming anastomosis between adjacent abdominal viscera - includes first magnet placed within first viscera and second larger magnet placed within second viscera, with raised rim of smaller magnet acting as fine cutting edge to accelerate process of ischaemic necrosis

16/26,TI/5 (Item 5 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
011066206
WPI Acc No: 1997-044130/199705
Arterio-venous shunt with control and two anastomosis extensions - has magnet or encased magnet made of inert tissue material

16/26,TI/12 (Item 12 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
008211403
WPI Acc No: 1990-098404/199013
System for anastomosis of digestive tract - has U-shaped retainers disposed around annular groove in outer periphery of support tube

16/26,TI/13 (Item 13 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
007961239
WPI Acc No: 1989-226351/198931
Intestinal anastomosis device - featuring facing each other bush surfaces with needles in diamagnetic material

24/26,TI/4 (Item 4 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
014283128
WPI Acc No: 2002-103829/200214

Suture device in surgery, has puncture units opened and closed by rod which is inside inner pipe , and magnet in secondary thread holder absorbs primary thread holder and lesion hole is sutured with a thread

31/26,TI/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
017305739
WPI Acc No: 2005-629371/200564
Self-operated mini therapeutic device for venous thrombus prophylaxis, has air cushion with magnets , and air passages whose mouth is connected to diverting valve of control circuit via pipes

31/26,TI/3 (Item 3 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
016216912
WPI Acc No: 2004-374800/200435
System for tightening pyloric sphincter and/or mediating relaxation of stomach muscles in the treatment of e.g. obesity or biliary reflux comprises an operative device adopted to ablate tissue; magnets ; or tissue constricting band

31/26,TI/12 (Item 12 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
008790840
WPI Acc No: 1991-294855/199140
Magnetic positioner arrangement - has first magnet positioned at location of screw hole in rod

31/26,TI/16 (Item 16 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2006 The Thomson Corp. All rts. reserv.
004172001
WPI Acc No: 1984-317540/198451
External intestinal fistula closing method - introducing ferromagnetic liquid, obturating orifice with porous material and applying ring magnet to it